Application or Docket Number

Effective October 1, 2000														
CLAIMS AS FILED - PART I (Column 1)						(Column 2)			SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS							Γ	RATE	FEE		RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA		E	BASIC FEE	355.00	OR	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS			34 minus 20=		• - 14		Ī	X\$ 9=		OR	X\$18=	252		
INDEPENDENT CLAIMS			2 minus 3 =		. 0		ł	X40=		OR	X80=			
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				<b>*</b>	+135=		OR	+270=			
* If	the difference	in column 1 is	less than ze	ro, ente	r "0" in c					OR OR	TOTAL	962		
	CI	LAIMS AS A	MENDED	IENDED - PART II						1	OTHER	7 - 7 -		
		(Column 1)		(Column 2)			_	SMALL		OR	SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	.34	Minus	** -	34	=		X\$ 9=		OR	X\$18=	<u> </u>		
	Independent	, a	Minus	***	3	=		X40=		OR	X80=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						\	+135=		OR	+270=			
							L	TOTAL		1	TOTAL			
		(Column 1)		(Colu	mn 2)	(Column 3)	P	ADDIT. FEE	<u> </u>	1-,,	ADDIT. FEE			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREV	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=			
	Independent	*	Minus	***		=	<b> </b>	X40=		OR	X80=			
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J ॄ	+135=		OR	+270=			
								TOTAL ADDIT. FEE		OR	TOTAL			
	(Column 1) (Column 2) (Column 3)								<u> </u>	J ~''	ADDIT. FEE	: <b>L</b>		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIG NUM PREV	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		=	] [	X\$ 9=		OR	X\$18=			
	Independent	*	Minus	***		I =	<u> </u>	X40=		OR	X80=	1		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<b>⋏</b>		<del>                                     </del>	1	<b></b>	<del>                                     </del>		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+135=		OR	+270=			
**	** If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

FORM PTO-875 (Rev 8/00)